
HEALTH PROMOTION AND DISEASE PREVENTION

TABLE OF CONTENTS

I.	Statement of Philosophy	2
II.	Legal Base	3
III.	Definition of the Service	5
IV.	Client Eligibility	7
V.	Service Provision	7
VI.	Staffing Requirements and Training	8
VII.	Records, Reports, and Reimbursement	8

APPENDICES

Health Promotion and Disease Prevention Monitoring Tool	Appendix 1
Example of Division of Aging Reporting Format for bi-annual and annual Reports and Instructions	Appendix 2
Program Instruction AOA-PI-01-03)	Appendix 3
Administrative Letter No. 94-14, dated 12/20/94	Appendix 4
Memorandum, Area Agencies on Aging, 4/30/01	Appendix 5

STATEMENT OF PHILOSOPHY AND PURPOSE

I. Statement of Philosophy and Purpose

Although aging itself is not a disease process, the body **may** become more vulnerable to disease and other environmental insults with age. Many of the diseases and chronic conditions that affect older adults derive from life-style and environmental factors. Effective health promotion and disease prevention efforts can have a positive impact on addressing these factors and maintaining and/or improving the health and wellbeing of older persons. The purpose of the Health Promotion and Disease Prevention service is to provide programs and activities which will assist older adults in maintaining a healthy lifestyle and/or in identifying health problems or potential problems and to offer effective interventions to address these problems.

LEGAL BASE

II. Legal Base

Older Americans Act of 1965 as Amended: 42 U.S.C. 3001 et seq., as most recently amended by Public Law 106-501, on November 13, 2000.
Section 102(12); Section 303(d); Section 321(a)(7)(8)(17); Part D, Section 361.

102. (12) See III. 'Definition of Service' Section

303. (d) There are authorized to be appropriated to carry out part D (relating to disease prevention and health promotion services) such sums as may be necessary for fiscal year 2001, and such sums as may be necessary for each of the 4 succeeding fiscal years.

321. (a) The Assistant Secretary shall carry out a program for making grants to States---for any of the following supportive services:

(7) services designed to enable older individuals to attain and maintain physical and mental well-being through programs of regular physical activity, exercise, music therapy, art therapy, and dance-movement therapy;

(8) services designed to provide health screening to detect or prevent illnesses, or both, that occur most frequently in older individuals;

(17) health and nutrition education services, including information concerning prevention, diagnosis, treatment, and rehabilitation of age-related diseases and chronic disabling conditions;

Part D, 361. The Assistant Secretary shall carry out a program---to provide disease prevention and health promotion services and information at multipurpose senior center, at congregate meal sites,---or at other appropriate sites.

North Carolina G.S. 143B-181.1(c): the Secretary of Health and Human Services shall adopt rules to implement this Part and title 42, Chapter 35, of the United States code, entitled Programs for Older Americans.

North Carolina G.S. 143B-181.4(4): Responsibility for developing policy---is vested in the Secretary of the Department of Health and Human Services---who may assign responsibility to the Assistant Secretary for Aging,---who shall be the bridge between the federal and local level and shall review policies that affect the well-being of older people---Responsibilities may include (4) Promoting the development and expansion of services;

The above referenced legal bases also give the Division of Aging the authority to establish broad procedures that address the administration of aging services. These are covered in the **North Carolina Home and Community Care Block Grant Procedures Manual for Community Service Providers**. This document should be used routinely by providers in administering their programs for topics such as: Confidentiality Policies and Procedures, Applicant/Client Appeals, Reporting Requirements, Reimbursement Procedures, etc.

DEFINITION OF SERVICE

III. Definition of the Service

Health Promotion and Disease Prevention services are those which promote the health and wellness of eligible older adults. Allowable services are as follows:

- A. Health risk assessments;
- B. Routine health screening, which may include hypertension, glaucoma, cholesterol, cancer, vision, hearing, diabetes, bone density, and nutrition screening;
- C. Nutritional counseling and educational services for individuals and their primary caregivers;
- D. Health promotion programs, including but not limited to programs relating to prevention and reduction of effects of chronic disabling conditions (including osteoporosis and cardiovascular disease), alcohol and substance abuse reduction, smoking cessation, weight loss and control, and stress management;
- E. Programs regarding physical fitness, group exercise, and music, art, and dance movement therapy, including programs for multigenerational participation that are provided by (i) an institution of higher education, (ii) a local educational agency as defined in Section 1471 of the Elementary and Secondary Education Act of 1965 (20 U.S.C. 2891), or (iii) a community based organization;
- F. Home injury control services, including screening of high risk home environments and provision of educational programs on injury prevention (including fall and fracture prevention) in the home environment;
- G. Screening for the prevention of depression, coordination of community mental health services, provision of educational activities, and referral to psychiatric and psychological services;
- H. Educational programs on the availability, benefits, and appropriate use of preventive health services covered under Title XVIII (*Medicare*) of the Social Security Act (42 U.S.C. 1395 et seq.);

- I. Medication management screening and education to prevent incorrect medication and adverse drug reactions;
- J. Information concerning diagnosis, prevention, treatment, and rehabilitation of diseases, and Alzheimer's disease and related disorders with neurological and organic brain dysfunction;
- K. Gerontological counseling; and
- L. Counseling regarding social services and follow-up health services based on any of the services described in paragraphs A through K above.

The term shall not include services for which payment may be made under titles XVIII and XIX of the Social Security Act (42 U.S.C. 1395 et seq., 1396 et seq.)

CLIENT ELIGIBILITY

IV. Client Eligibility

The target population for Health Promotion and Disease Prevention services is persons 60 years of age and older. Primary caregivers of eligible older persons are eligible for nutritional counseling and educational services. Special emphasis should be placed on serving those individuals who have the greatest economic and social need for services, including providing services to low income minority individuals and older individuals residing in rural areas, and those who are at increased risk of health impairment, and those who do not have access to other preventive and health maintenance services.

SERVICE PROVISION

V. Service Provision

Services are to be provided in settings that are easily accessible to older adults and are appropriate and adequate for the programs and activities provided.

Priority should be placed on providing those programs and activities which address the leading health problems of older adults in the community.

Agencies providing services shall collaborate with other community agencies and groups concerned with the health and wellness of older adults (health department, parks and recreation department, hospital wellness program, cooperative extension service, etc.) in the planning, development and delivery of programs and activities.

Agencies providing services are strongly encouraged to utilize older consumers in program planning, development and implementation.

Agencies which provide exercise/physical fitness programs are encouraged to have program participants sign liability waiver forms which are maintained on file.

Emphasis should be placed on utilizing private funding sources to purchase incentive items utilized to promote Health Promotion and Disease Prevention services or to reward program participants (ex., tee shirts, water bottles, etc.).

Prohibited Activities:

Services cannot be paid for that are covered under Title XVII (Medicare) of the Social Security Act (42 U.S.C. 1395 et.seq.). This includes flu shots, mammograms, pap smears, laboratory services, and durable medical equipment. Consult the Medicare Handbook for information on services covered by Medicare.

The purchase of medical services, prescription drugs, physical examinations, home safety devices for individuals, and activity of daily living supply items, (ex. grab bars for tubs, etc.) are not allowable costs

Activities that are strictly recreational (offered for amusement) in nature are not allowable costs.

STAFFING REQUIREMENTS AND TRAINING

VI. Staffing Requirements and Training

All services must be provided by appropriately trained professionals or paraprofessionals. All personnel must meet relevant licensure and certification requirements established by North Carolina General Statutes.

RECORDS, REPORTS AND REIMBURSEMENT

VII. Records, Reports and Reimbursement

- A. Documentation: Each agency providing Health Promotion and disease Prevention services must establish and maintain appropriate records (sign in sheets, etc.) to document individuals' participation in services.
- B. Voluntary Contributions: In accordance with the requirements of the Older Americans Act, agencies must provide individuals receiving services the opportunity to contribute to the cost of service. Eligible persons receiving Health Promotion and Disease Prevention services are subject to these requirements. Agencies must establish written policies and procedures governing the collection of voluntary contributions.

- C. Reporting: Providers of Health Promotion and Disease Prevention services shall submit to the Area Agency on Aging each quarter the number of unduplicated persons served per program or activity.
- D. Reimbursement: Health Promotion and Disease Prevention services will be reimbursed based upon line item expenditures. Specific procedures for service reimbursement are outlined in the Division of Aging Home and Community Care Block Grant Procedures Manual for Community Service Providers.